

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF PENNSYLVANIA**

SAMSON B. SLEWION

(In the space above enter the full name(s) of the plaintiff(s).)

**10 5325**

- against -

NORMAN WEINSTEIN

CHARLES SCHLEIFER

RICHARD KUPERSMITH, P.C.

ATTORNEYS AT LAW

**COMPLAINT**

Jury Trial: ☒ Yes ☐ No

(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

SAMSON B. SLEWION

Street Address

P.O. Box 38015, PHILA., Pa. 19102

County, City

State & Zip Code

Telephone Number

267-593-5495

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name NORMAN WEINSTEIN  
 Street Address 1835 MARKET STREET, 27<sup>th</sup> FL.  
 County, City PHILA., Pa.  
 State & Zip Code Pa. 19103

Defendant No. 2

Name CHARLES SCHLEIFER  
 Street Address 1835 MARKET ST., 27<sup>th</sup> FL.  
 County, City PHILA., Pa.  
 State & Zip Code Pa. 19103

Defendant No. 3

Name RICHARD KUPERSMITH  
 Street Address 1835 MARKET ST., 27<sup>th</sup> FL.  
 County, City PHILA., Pa.  
 State & Zip Code Pa. 19103

Defendant No. 4

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

- A. What is the basis for federal court jurisdiction? (check all that apply)

☐ Federal Questions ☒ Diversity of Citizenship

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship

LIBERIA

Defendant(s) state(s) of citizenship

U. S. A

### III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 1634 SPRUCE STREET, PHILA, PA. 19103, IN RICHARD KUPERSMITH'S OFFICE.

B. What date and approximate time did the events giving rise to your claim(s) occur? JULY 12, 2005, AT APPROXIMATE TIME OF 1:30 PM.

C. Facts: ON JULY 19, 2004, PLAINTIFF WAS STRUCK BY A FIRE EXTINGUISHER ON THE FOREHEAD BY VONDA WILLIAMS WHEN PLAINTIFF WAS A BUSINESS INVITEE OF MANTEL H. HORTON AND HORTON'S INN AND VONDA WILLIAMS WAS A EMPLOYEE OF MANTEL HORTON AND HORTON'S INN WITH AN EXTENSIVE CRIMINAL RECORD WITH VIOLENCE.

What happened to you?

Who did what?

ON JULY 12, 2005, PLAINTIFF Hired THE LAW FIRM OF WEINSTEIN, SCHLEIFER AND KUPERSMITH, P.C., ATTORNEYS AT LAW TO REPRESENT PLAINTIFF IN A TORT ACTION AGAINST MANTEL H. HORTON, HORTON'S INN AND VONDA WILLIAMS.

Was anyone else involved?

ON SEPTEMBER 9, 2005, THE LAW FIRM OF WEINSTEIN, SCHLEIFER AND KUPERSMITH, P.C. ATTORNEYS AT LAW PREPARED A MAJOR JURY COMPLAINT AND ASKED PLAINTIFF TO SIGN THE VERIFICATION OF THE COMPLAINT WITHOUT GIVING A COPY OF THE COMPLAINT TO PLAINTIFF FOR OBSERVATION.

Who else saw what happened?


①

ON MAY 16, 2008, THE LAW FIRM OF WEINSTEIN, SCHLEIFER AND KUPERSMITH, P.C. ATTORNEYS AT LAW WROTE JOSEPH HASSETT, ESQUIRE MANAGER OF THE ARBITRATION CENTER OF THE COURT OF COMMON PLEAS THAT THE MATTER BE TRIED AS AN ARBITRATION MATTER RATHER THAN A MAJOR JURY COMPLAINT PREPARED AND SUBMITTED TO THE COURT.

ON DECEMBER 16, 2008, A PANEL OF ARBITRATORS AWARDED THEIR MAXIMUM OF (\$50,000.00) FIFTY THOUSAND DOLLARS TO PLAINTIFF.

ON JANUARY 7, PLAINTIFF REQUESTED TO DEFENDANTS ~~PLAINTIFFS~~ TO APPEAL THE AWARD, BUT FLATLY REFUSED.

THE LAW FIRM OF WEINSTEIN, SCHLEIFER AND KUPERSMITH, P.C. ATTORNEYS AT LAW HAS DESTROYED PLAINTIFF'S LIFE, BY PREPARING A MAJOR JURY COMPLAINT AND REQUESTED THAT THE MATTER BE TRIED AS AN ARBITRATION MATTER IN ITSELF IS PROFESSIONAL MALPRACTICE AND FRAUDULENT REPRESENTATION.

BY: 

SAMSON B. SLEWION

ON FEBRUARY 17, 2009, THE COURT OF COMMON PLEAS REMOVED THE LAW FIRM OF WEINSTEIN, SCHLEIFER AND KUPERSMITH, P.C. ATTORNEYS AT LAW FROM THE CASE FOR TRICKING PLAINTIFF TO SIGN A VERIFICATION WITHOUT OBSERVING THE COMPLAINT.

## IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

PLAINTIFF SUSTAINED MULTIPLE INJURIES, INCLUDING BUT NOT LIMITED TO, A COMMINUTED LEFT FRONTAL SINUS FRACTURES, MULTIPLE ORBITAL FRACTURES, A 10 CM. LACERATION OF THE LEFT FRONTAL SCALP, CONCUSSION WITH HEADACHES. PLAINTIFF WAS REQUIRED TO UNDERGO AN OPEN REDUCTION AND INTERNAL FIXATION WITH PLATES OF THE LEFT FRONTAL SINUS AND THE MULTIPLE ORBITAL FRACTURES AS WELL AS MULTIPLE LAYER CLOSURE OF THE AFORESAID 10 CM. SCALP LACERATION.

## V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

PLAINTIFF SEEKS THE JUDGMENT OF \$11,800,000.00) ELEVEN MILLION EIGHT HUNDRED THOUSAND DOLLARS.

PLAINTIFF HAS SUSTAINED PERMANENT DISFIGUREMENT OF HIS FACE AND SCALP.

PLAINTIFF HAS UNDERGONE GREAT PHYSICAL PAIN AND MENTAL ANGUISH AND WILL CONTINUE TO ENDURE THE SAME FOR AN INDEFINITE TIME IN THE FUTURE.

PLAINTIFF HAS BECOME OBLIGED TO EXPEND AND/OR INCUR LARGE SUMS OF MONEY FOR MEDICAL ATTENTION AND VARIOUS PURPOSES IN AN ATTEMPT TO AFFECT A CURE FOR THE AFORESAID INJURIES, AND PLAINTIFF MAY BE COMPELLED TO EXPEND AND/OR INCUR ADDITIONAL SUMS FOR SUCH MEDICAL ATTENTION AND PURPOSES FOR AN INDEFINITE TIME IN THE FUTURE.

PLAINTIFF HAS SUFFERED AND MAY IN THE FUTURE SUFFER A SEVERE IMPAIRMENT OF HIS EARNINGS.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 7<sup>th</sup> day of OCTOBER, 2010.

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

E-mail Address

[Signature]  
P.O. Box 580N  
PHILA, Pa 19102  
267-593-5495

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff: \_\_\_\_\_

Inmate Number \_\_\_\_\_